

Illinois Department of Employment Security
Local Office City
Local Office Address
Local Office City, State & Zip Code
Phone: (000) 000-0000 TTY: (000) 000-0000
Fax: (000) 000-0000



www.ides.illinois.gov



JOHN Q. PUBLIC
100 MAIN STREET
ANYTOWN, IL 60000

Date Mailed: 05/25/2010
Claimant ID: 0000000

U. I. Findings - Example

(Este es un documento importante. Si usted necesita un intérprete, póngase en contacto con su oficina local.)

Dependent Type: None

Filing Type: In-Person

Payment Method: Pending Debit Card

Last Employer: WWW Employer Inc.

Last Day Worked: 05/21/2010

Unemployment Reason: Laid-Off (Lack of Work)

Your bi-weekly call certification day is: Wednesday

Your First Certification date is: 06/09/2010

You may certify by telephone at (312) 338-4337 or by using the Internet at www.ides.illinois.gov/certify. The best way to certify for benefits is the internet. These services are available Monday – Friday from 05:00AM to 07:30PM.

You have the option of depositing your UI benefit payments directly into your checking account or directly applied to a debit card. To begin the process, visit the IDES website at www.ides.illinois.gov and look for payment options or contact your local office.

Your current payment status is pending debit card. A debit card will be issued to you within the next 7 days. This card must be activated by calling (866) 728-2167 to receive your benefits, please activate as soon as you receive the debit card.

Federal Additional Compensation (FAC) Program provides a \$25 weekly supplement to individuals who are eligible to receive unemployment benefits under federal or state law.

If you have established a benefit beginning prior to May 30, 2010 the payment of FAC will continue for any week which you are eligible for regular unemployment insurance benefits through the week ending December 11, 2010. If your benefit year did not begin prior to May 30, 2010 FAC benefits will end with the week ending April 5, 2010.

FAC benefits are subject to federal and state taxes.

An individual may not receive a FAC supplement if they are ineligible for unemployment benefits. If you were paid a FAC supplement to which you were not entitled, an overpayment will be established.

Benefit Year Begin Date: 05/23/2010

Benefit Year End Date: 05/22/2011

Date of Claim: 05/23/2010

Program Type: Regular

Qualifying Period Quarters and Wages Paid

Employer Name	Q1/2009 (\$)	Q2/2009 (\$)	Q3/2009 (\$)	Q4/2009 (\$)
WWW EMPLOYER INC. EMPLOYMENT TAX	16,852.64	16,685.50	16,685.52	18,085.50

*If any of the wages show above are not yours, contact your local office immediately.

UI Monetary Determination

Weekly Benefit Amount: 385.00

Dependence Allowance: 0.00

Benefit Amount per Week: \$385.00

Maximum Benefit Balance (Does not include dependency allowance): \$10,010.00

If you think this information is incorrect or require additional information, contact the local office below:

Appeal Rights: If you disagree with the amount of wages shown...

Local Office Name
Local Office Address
Phone: (000) 000-0000